

State of Washington Application for a Water Right

of Ecology MAY 2 1 2002

| For Ecology Use Fee Paid 10 Date 5/21/02 UK# 957 For | |
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Please follow the attached instructions to avoid unnecessary delays

| Section 1. APPLICAN | (TEPPERSON | h ORGAN | IV/AUH(O)N, O | IR WATE | R(5)(6) | BW |
|--|---------------------|--|----------------------|--------------------|-------------|--------------------------------|
| Vame James 14. | Davenpa | ort | Home To | el: (<u>102</u>) | 456 - | 8248 |
| Mailing Address 175 2 | Beechnut | Au | Work To | el: (702) | 486- | 2689 |
| City Henderson | _ State NV Zij | p+4 898 | 14+ 0953 FA | X: (|) | |
| Section 2. CONTACT Same as above | -PERSON T | | | CAPPIJ(| CATION | 1 |
| Name | | | | | | |
| failing Address | | | | | | |
| City | | | | | | • |
| Relationship to applicant | | | | | | |
| Section 3. STATEME | giraleo ir | NT | | | | |
| The applicant requests a permit | to use not more th | nan | 133 | (🛚 | gallons pe | er minute or |
| cubic feet per second) from | a 🗌 surface water | source or | ground water sour | rce (check o | nly one) fo | r the purpose(s) |
| DESCRIPTION OF THE PL | ACE OF USE. (S | ee instruction | ns.) NOTE: A tax | parcel numb | er or a pla | t number is not |
| <i>sufficient.</i> Estimate a maximum annual qu | | | | | | |
| | antity to be used I | | | | that the | oton will be a selection |
| ☐ Check if the water use | | e | ect. Indicate the pe | erioa of time | that the W | ater will be needed |
| From/ | | | | | | |
| Section 4. WAYNER | WALK-I | 7 | | | 14511 | |
| If SURFACE WATER | DEPT. OF ECO. | | If GROUNDWA | TER | | |
| Name the water source a | MAY 2 1 200 | | A permit is desir | | 1 | well(s). |
| lake, etc. If unnamed, wr | N 2002 | 4 | ri perime is desir | | | won(b). |
| "unnamed stream," etc.: | REGION OFF | Sy. | | | | |
| Number of diversions: _ | | | | | | |
| Source flows into (name | | | Size & depth of | | | |
| | | | 8" casing | 250 | 0 - 300 | ct. |
| LOCATION | | | | | | |
| Enter the north-south and e | ast-west distance | s in feet from | n the point of di | version or v | vithdrawa | l to the nearest |
| section corner: 2000' | north & 1 | 200 E | 94 of 500 | Houses | t corv | ner of |
| Section 10, town | N II Gure | nange | | · W. | | |
| 1/4 of 1/4 of Sect | ion Township | Panga (EAV) | County | If loca | | e is platted, complete low: |
| 3600 | TOWNSHIP | Range (E/W) | County | Lot | Block | Subdivision |
| Sw Je | 1110 | 20E | Yakim | 9 11,10 | | Parker Ord |
| | | | | 1 | | 11 00-013 |
| For Ecology Use Date Received: | May 21, 20 | Priority | Date: May 2 | 1 2002 | | YAKMA- |
| | C License # | | Dept. Of | | | |
| Date Accepted As Complete 05- | | Con Contract of the Contract o | e Returned | | By | WRIA: 37 |

ECY 040-1-14 Rev. 7/97 * * f **APPLICATION**

Appl. No.: 64-37555

| Sec | ction 5. GENERAL WATER SYSTEM INFORMATION | | |
|--------------|---|---------------------------------|-----------------|
| A. | Name of system, if named: | | |
| B. | Briefly describe your proposed water system. (See instructions.) | 3 181 x | € |
| | Direct delivery into eravity flow or - | face was | |
| | Direct delivery into gravity flow or- for drip / sprinkler irrigation installed pursuant to rules and regulations of | on premis | ~ .5 |
| | pursuant to rules and regulations of | Roza Irrig | otio |
| | District, or storage of same for such | direct | |
| | delivery Property to be served = 27 | | |
| C. | Do you already have any water rights or claims associated with this property or system of the property of the | m? | □NO |
| | PROVIDE DOCUMENTATION. Roza Irrigation Distri | ch | |
| | ection 6. DOMESTIC/PUBLIC WATER SUPPLY SYSTEM INF Completed for all domestic/public supply uses.) | ORMATION | |
| A. | Number of "connections" requested: Type of connection | | - |
| | | partment, Recreationa | |
| B. | Are you within the area of an approved water system? If yes, explain why you are unable to connect to the system. Note: Regional water so County Health Department. | ☐ YES systems are identified | □ NO by your |
| Cor | mplete C. and D. only if the proposed water system will have fifteen | or more connect | ions. |
| C. | Do you have a current water system plan approved by the | _ | |
| | Washington State Department of Health? If yes, when was it approved? Please attach the current approved. | ☐ YES proved version of your | □ NO plan. |
| D. | Do you have an approved conservation plan? | □YES | □NO |
| | If yes, when was it approved? Please attach the current ap | proved version of your | plan. |
| 200001110001 | ection 7. IRRIGATION/AGRICULTURAL/FARM INFORMAT Completed for all irrigation and agriculture uses.) | ION | |
| A. | Total number of acres to be irrigated: | | |
| B. | List total number of acres for other specified agricultural uses: | | |
| | Use Acres | | |
| | UseAcres | | |
| | Use Acres | | |
| C. | Total number of acres to be covered by this application: | | |
| D. | Family Farm Act (Initiative Measure Number 59, November 3, 1977) Add up the acreage in which you have a controlling interest, including only: ‡ Acreage irrigated under water rights acquired after December 8, 1977; ‡ Acreage proposed to be irrigated under this application; ‡ Acreage proposed to be irrigated under other pending application(s). | | |
| | 1. Is the combined acreage greater than 2000 acres? | ☐ YES | NO |
| | 2. Do you have a controlling interest in a Family Farm Development Permit? If yes, enter permit no.: | ☐ YES | MNO |
| E. | Farm uses: Stockwater Total # of animals Animal Type | (If doing and a see ! | lor:\ |
| | Stockwater - Total # of animals Animal Type Dairy - # Milking # Non-milking | (11 dairy caule, see be | iow) |

| We are returning your application for the following reason(s): Examination fee was not enclosed APPLICANT PLEASE RETURN TO CASHIER, PO BOX 5128, LACEY, W 98509-5128 Section number(s) is/are is/are incomplete APPLICANT PLEASE RETURN TO THE APPROPRIATE REGION/OFFICE | |
|--|--------|
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| ncomplete RETURN TO THE APPROPRIATE REGIONAL | |
| APPROPRIATE REGIONA | |
| OFFICE | AL |
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| Explanation: | |
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| Please provide the additional information requested above and return your application by | |
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| cology staff Date | |
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| cology is an Equal Opportunity and Affirmative Action employer. | |
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| cology is an Equal Opportunity and Affirmative Action employer. o receive this document in alternative format, contact the Water Resources Program at (360) 407-6604 (360) 407-6006 (TDD). | 4 (Voi |

APPLICATION

Use this page to continue your answers to any questions on the application. Please indicate section number before answer.

| Will you be using a dam, dike, or other structure to retain or store water? | ☐ YES ☒ NO |
|---|--|
| NOTE: If you will be storing 10 acre-feet or more of water and/or if the water depth will be point, and some portion of the storage will be above grade, you must also apply for a rese reservoir permit application from the Department of Ecology. | |
| Section 9. DRIVING DIRECTIONS | |
| Provide detailed driving instructions to the project site. From Yakima, South on I-82 to SU.S.12 U.S. 12 to Yakima Valky Hiway; South on Reserved. | a Y.V. Hiway to |
| Buena Rd.; Turn left, then left (morth north on KnightHill to Gilbert Road; east a first left after Ballard Rd at Union Gap Con Section 10. REQUIRED MAP Property on left. | on Gilbert Rd to al; north 600' to |
| A. Attach a map of the project. (See instructions.) | |
| See attached | |
| Section 11. PROPERTY OWNERSHIP | |
| A. Does the applicant own the land on which the water will be used? If no, explain the applicant's interest in the place of use and provide the name(s) are of the owner(s): | ☐ YES ☐ NO |
| | |
| B. Does the applicant own the land on which the water source is located? If no, submit a copy of agreement: | ⊠ YES □ NO |
| I certify that the information above is true and accurate to the best of my knowledge to process my application, I grant staff from the Department of Ecology access to the monitoring purposes. Even though I may have been assisted in the preparation of the employees of the Department of Ecology, all responsibility for the accuracy of the information. | e site for inspection and e above application by the |
| | |
| Applicant (or authorized representative) 5/21/0 Date | 2 |
| | |
| Landowner for place of use (if same as applicant, write "same") Date | |

Section 8. WATER STORAGE